ADDENDUM

This is what I sent to the WARDEN Sefay Han Petinament ASK the Wondow to Bersew the (RIC) Application

OFFENDER MEMO

Petilbonas 5-20. 6762058 LIVING UNIT DATE: STAFF RESPONSE: Kecel 5/2 OFFENDER REQUEST: g dext FROM: TO: 44

Date

Signature

GREGORY SCARPA JR. P.O. Box 316 Fort Madison, Iowa 52627

Friday, May 10, 2019

RRM Kansas City Residential Reentry Office

Attention: Kris Roble

400 State Ave., Room 131

Kansas City, KS 66101

RE: Application for Administrative Remedy Program/Reduction in Sentence (RIS), Compassionate Release

Name: Gregory Scarpa Jr.

• Federal Register Number: 10099050

- Date of Birth 08-03-1951
- Age 67
- Institution Iowa state Penitentiary

EXHAUSTION REQUIREMENTS

ISP Warden:

- Date RIS request received by institution: 05-20-2019
- Date of ISP Warden of treatment Response: 07-05-2019
- Response: "Denied @ this time. You need to State your release questions & issues thru the Federal System Representative on their next visit."
 See Attachment: 1___
- Print Recipients Name here: Addressed to: Warden Wachtendorf-Responded on her behalf by Warden of treatment Mike Schierbrock

Position at Institution: Warden of treatment
(Warden-Please fill in date, Name & Position above, copy and return one copy to sender)

- Staff did not assist with RIS request.
- This request was Not submitted by a third party

- Reason for disposition: Both Medical And Age
- Date of disposition of request: Saturday, May 18, 2019

Attachments:

- 1
- Medical, disciplinary and all other prison records are available to parties for review, through my filing of this application.

This is a request for a motion under §571.61 Section: 2-initiation of Request-Extraordinary or Compelling Circumstances-

See: 18 U.S.C. 4205(g)/or18U.S.C.3582(c) (1) (A); Subsection; **4.b. Elderly** inmates with medical condition:

Must fit the Following criteria:

- Age 65 & older: Yes
- Currently suffers from (chronic or serious) medical conditions related to the aging process: Yes
- Experiencing deteriorating physical health that substantially diminishes their ability to function in a correctional facility: Yes
- Conventional treatment promises no substantial improvement to physical condition: Yes
- Have served at least 50% of their sentence: Yes

Statement from Gregory Scarpa Jr.:

I would

like all parties to know of my current health issues. First, I cannot eat with the general population and am forced to eat alone because of the throat cancer and effects of the radiation. The reason, I eat to slow & choking is a frequent occurrence sometimes frequent vomiting. Second, I cannot eat about 80% of the meals prepared by the prison for the same reasons stated. The prisons had replaced my hot meals with cold cuts for the last four years. Third, this matter is becoming more severe as time passes and I am concerned sometime soon I could choke to death. Fourth, I have also suffered nerve damage and I have cognitive decline verified by the prison Psychiatrist, simply put it could be early stages of dementia/Alzheimer. These matters I speak on can be verified by ISP Prison medical staff. Fifth, I also suffer with a hypothyroid issues making maintaining

weight difficult and I have a hearing problem which is increasingly becoming worse. Sixth, I have had 5-hernias in the past 12-years, psoriasis causing skin issues, high cholesterol, arthritis/joint pain, foot issues, and sciatic nerve issues. Lastly, recently I have been diagnosed with cataracts.

All issues are serious and cumulative in severity with my aging.

The BOP should consider the following factors when evaluating the risk:

- Age at which the inmate was when he committed the offense: I have been in prison since Age 37-(1988) ran consecutive with this current case committed in 1995 trial held in 1999 and sentenced soon after.
- Whether the inmate suffered from these medical condition at the time the inmate committed the offense: No
- Whether the inmate suffered from these medical condition at the time of sentencing and whether the presentencing Investigation report (PSR) mentions these conditions: No

7. FACTORS AND EVALUATION OF CIRCUMSTANCES IN RIS REQUEST:

- Nature and circumstances of the inmates offense:
- o Criminal history
- o Comments from victims.
- o Unresolved detainers
- Supervised release violations
- o Institutional adjustment.
- o Disciplinary Infractions.
- Personal history derived from PSR
- Length of sentence and amount of time served this factor is considered with respect to proximity to release date or residential Reentry Center (RRC) or home confinement date.
- o Inmate current age:67
- Inmate age at time of offense and sentencing:
 - 1. I have been in prison since Age 37-(1988) ran consecutive with this current case committed in 1995 trial held in 1999 and sentenced soon after.
- o Inmate release plans (employment, medical, financial).

- Assured Storm Protection-(great pay with medical benefits) 319 S. W. 13th Avenue Pompano Beach Florida Contacts: Office Manager Barbara & Owner Graziano Farrari Phone # 654-772-9009
- o Whether release would minimize the severity of the offense.

Dear Warden Wachtendorf, please return 1-copy to myself here at the prison with your response and forward an additional copy to RRM Kansas City Residential Reentry Office 400 State Ave., Room 131, Kansas City, KS 66101. I thank you for your assistance with this matter and wish a happy retirement.

This is a request for BOP's appropriate staff (See: Mr. F. Edwards) to signoff

in support of Gregory Scarpa Jr's. Motion under §571.61 Section: 2-initiation of Request-Extraordinary or Compelling Circumstances-	
Signature of:	
Printed Name of signature above	
Position of signer above	



U.S. Department of Justice Federal Bureau of Prisons

Residential Reentry Management Branch

Kansas City Residential Reentry Office

400 State Avenue Tower II, Suite 800 Kansas City, KS 66101

August 13, 2019

Gregory Scarpa #6767058 lowa State Penitentiary PO Box 316 Ft. Madison, IA 52627

Dear Mr. Scarpa,

This is in response to your request for Compassionate Release/Reduction in Sentence (RIS) consideration received July 30, 2019, wherein you are requesting to be considered for RIS based on age, medical conditions, and completion of more than 50 percent of your sentence.

Based on our review of your medical records, you do not meet the Bureau of Prisons elderly with medical conditions RIS criteria. You are independent and are not experiencing deteriorating mental or physical health that substantially diminishes your ability to function in a correctional environment. Your current facility is able to manage your medical needs at this time.

If you do not agree with this decision, you may appeal using the Administrative Remedy Procedures to Kansas City Residential Reentry Office, Federal Bureau of Prisons, 400 State Ave, Tower II Ste 800, Kansas City, KS 66101. Your appeal must be received within 20 days from the date of this response.

Sincerely,

Gregg Fearday, RN

Acting Residential Reentry Manager

	54102 -19	4 4 7	Madresas	(0) 90	Date
ISP OFFENDER MEMO	FROM: Scarper Greg Sile # 6262058 LIVING UNIT SHI	OF The above date of Time Below On the above date of Time Below Onto the above of the Selen	SOF Prisons 400 State Hort	STAFF RESPONSE: - 40 Chal Birly 8/28/2019 & 7:30 P.M.	Signature

Residencial Reentry office - appeal from Gregory Scarpa I respectfully do not agree With the Decision That I do not meet the Bureau of Risons elderly with medical Conditions Ris Criteria. Us for being independent? as much as I would leke to be it's not the case - at every meal time of med someone to be mear while I eat, as at ent and or try to eat wishout charing it doesn't hoppin, il choke at every mood - at times have no-breath a becomes vory Dangerous of almost passing out - With thet being the Case & connot lat with the general Copulation - This is all from the Cancer Tumor that was ale size of a golf ball in my throat that has left a hale where there's no deposit from my wind Pipe o to where the food goes down as for not experiencing deterinating mental or Physical Lealer That substantially diminishes my ability to function in a correctional environment, I disagree, first I'm diagnos With having Mild cognitive impairment, my symtoms are Which seems to be getting Works everylay, Forget Things That are important, Example: Pac #5 & Telephone #5 appointments, d get lost in Consensations (I don't understand) - Apolter Words I lose my Train of Thought - I could No longer read a Book of completely understand what I just read or remember a movie from the night lefor. I believe the mild cognitive impairme Was the cruse at my work, I forgot to shut off a machine before cleaning which reducted chapping up My Muddles, IND

Jungers, as a final result of meeted 7 stitches & NOW have Kimited use w/nerus damage to them fingers. This mild cognitive impourent can be verified by Byeldogist Toy Kupes of DR. Greg Keller. My cating problem (Choking) falls on Deaf ears - The modical staff Cure for mot being able to eat Sof or what Food Service propare are to give me a small Amount of cold Cuts, Bread & Rudding levery might which I also choke with also also is very difficules to maintain a healthy weight - I beep my weight by cating decream a cookier overy single might & That in thely is NOT Healthy. I also request reconsideration of my application (RIS) Based on separate grounds That I 68 years old and Sas Served 30 Straight years much more Han 50/ of my Sentence Thysical health Disteriorating . I Do not have range of matin in my mook the so Merve Tomage couled by Lower an 8 hour surgery in my neck depende of the 5 hour Surgery en my throat - ilm taking 3200 mgs of GABA penting That helps me (minimal) - During the two Cancer Surgeries The right lide cartied artery was remared, reserved the Blood flow so the romaining Caratid - Boung in this Candition Combined with my age is very banques in a Penitentiony that have many of the majority of young tought who are Contractly trying to make a name for themselves - one Kit/Panch to my mock can be fatal Ohn Mode that I take Diely are AtomoxETine 60 mg To

To Keep my cholesteral from elevating - Pilocarpine smg To Holp
Develope the much needed Soliva - (Does NOT HOPP much) My Soliva Glan
Were OF BUENT DUE TO MANY RADIATION EXISTS KILLING The CANGER CELLS
I TAKE OMEDIAZOLE Long For Hear BURN That Continuensky Kop me
up many mights - Dental Biotone & Biotone Dry Mouth rins
To moister my mouth in the place of Seling - MIRTAZEPINE FOR
depression = I'm given 3 Packs of CARNATION TO MIX with MILK SO
To help gain weight to No-avail - CloBatAsol 0.05/ For the Swriteris
That continues to get worse of developing on my FACE lessides The numer
area's of my Bady Asprin Daily To Keep my Eloob Thin
ATTAChments -4
4- Personal Letters from Fellow INMATES
That are Friends of mine
Genceroly
Γ
Grane Copa
Federal 10099050

Lear Mr. Fearday. My name is Patrick, I am writing this letter to give you a better insignt into the day to day life of my Cell mate Gregory Scarpa. We first started rooming tagether about 5 months ago. In the beginning Erry World ask me for small favors that I would think nothing of He would ask me to wake him of for med-time, or remand him that he had to go to work, What day it was, ar when it was time to cat. Daily trays are sent to the living unit for him and at first I couldn't figure out why. The means never are almost conflictely inedibble for him. It is hard to water a Proson you like, that has so much Pride, get depressed and twow away a unde meal be cause he chokes an almost every other bite. It is also bad to See go - 6 reg teel emborassed when he asks me for help making his bed of Cleaning ow Cell because simple tasks a so Physically demanding on him. As our time in the Cell together has Progressed I have noticed not only Physical but mental @ troubles. Mr. Scarla is a great cellmake. Fre had troubles acclimating to try own situation, but any help I have needed adjusting or any advice I've needed he has given me. I held Mr Scarpa out of kindness and Decause its the right thing to do. It is hard to water a man with so much Pride and Self worth Suffer Silently because his emborrosed to ask for help I have this letter gives you a better view of the man behind the vame, Sincerely Patrick Thompson # bolles 645

Danis GALLY 1000 465 Vear Grey Fearday, I am writing this letter concerning Greg Scarpa, a friend of mine the past 7 years. was very fit, strong and active us appetite. Since cancer surgery he cost eat! a lot of the meals here and has that choking problems that and a few were very scary always on the treddmill and eliptical machine - now never the seems to be losing interest or depressed? I have gave him a hard time at his memory, not realizing tel year that it, is bad, I to The just butchered names of weight He forgets the days often land days We those chapel, Visital and dr. apple. He is possible seciting a morite the news events. My father had dementing and I see symptoms of it in Greg. I do recall an indident where he hurt himself at the shops where he works. Obelieve he is declining faster than normal and he needs thelp A.12

08-29-201 Gara Kirch ner \$ 5076674 V.O. Box 316 Fort Molasur Jova 52627 I declare under proalty of perjury that the toregoing is true and lotrect, I have been friends with Greg Scarpa Pl for Several years and also work with him in the industries building things out of I have notice the change my Mr. Scarpa to be much more serious In the last louple of years His focus and memory had become very Serious, even comsing hun a Derrons accident on a boring machine which almost cost him a singiarque. It was a Service Ling May and p I have watched his decline m Joeus & Memory, With his cancer I béliéve he is deserving of a chance at Sreedon a to be with his family In his last stage of life, as I believe he is deteriorating quickly. I wise this in Concern that you not just Consider each of his issues seperate but at least view in the totality as he is soruggeling in poison. gary Kwehnes17/150729 P.O. DOX 316 08-29-2019) Fort Madison Jawa 57657 him it fileg bud many show theyes over She Shuddyllas he he and I pave been friends In all some will be did a find the some has a find the some the so last few years he has Longst wary July 5 10 While Most Would with the belleve his memory is yethy had and getting bosse with 25 15 les com Significant Som LOTICE as fill some FOLLES US TO be USE to One austher The and the Colon of the Same belones worse he will tellene defendan on us his tiles to be the him Blueve this word be best to the form of the Samily to do not possines HIS Cancel has laused him to Lave to lat alone and how wifeld to Go to Chow with the Rest of the population. He diserves to be Ist out so his family han care Thank Hon are Mosepon #16802 A14

August 29, 2019

To Whom it May Concern,

Our names are Danielle and Gregory Scarpa and we are writing this letter on behalf of my father-in-law, and my husband's father, Gregory Scarpa Jr. He recently applied for Compassionate Release/ Reduction in Sentence (RIS) and was denied. The rejection letter of his Compassionate Release/ RIS states that he does not meet the Bureau of Prison's Elderly with Medical Condition Reduction in Sentence (RIS) criteria. They claim that he is "independent" and not experiencing deteriorating mental or physical health that substantially diminishes his ability to function in a correctional environment. The rejection claims that his current housing facility is able to manage his medical needs at this time. My father-in-law has multiple medical issues, including Stage 4 Throat Cancer, that are not continually monitored in the state penitentiary and that is a hazard to his health and his quality/ quantity of life. Maybe if someone from the Bureau of Prisons would actually meet him in person and spend a few hours with him, instead of just reading reports about his health, then it would be obvious to the Bureau how much he is NOT independent and that the prison facilities are now hindering and substantially diminishing his health and he is progressively getting worse as time goes by.

We will be explaining in detail the multiple medical issues that are affecting our father, Gregory Scarpa Jr.and how living in a state penitentiary is definitely hindering his health problems. My father-in-law is a survivor of Stage 4 throat cancer. The first time I met him in person was in 2015, soon after one of the major surgeries performed on his throat in treating the throat cancer. My husband and I just recently came back from my second visit with him in the beginning of August of this year (2019.) When we compare the way Greg looked physically between the two visits 4 years apart, we must admit he looked better in 2015, even though he just had major surgery on his throat and was undergoing chemotherapy and radiation at the time. We fear that his cancer will return, which is a normal fear for anyone with a family member in remission from cancer. But, the difference is my father-in-law can not go to the doctor for a checkup that easily. Unfortunately, it may take quite some time for Greg to finally get to the hospital or doctor's office after putting in a request to see a doctor. Cancer can be growing rapidly inside him long before he is able to get testing done on the status of the cancer. If, God forbid, the cancer does come back, then he would have to undergo chemotherapy and radiation for the second time in prison.

Another health problem that we are very concerned about is his brain functioning; memory loss, lack of concentration, forgetfulness and the results of his last brain test. Greg's psychiatrist at lowa State Penitentiary, Joy, recently received results from testing performed on his brain and it shows Mild Cognitive Impairment, which is often a precursor to Dementia. If Greg was on the outside, his doctor would most likely recommend that Greg be put on proper medications which could help prevent or slow down the progression of the Dementia. But in the state penitentiary setting, Greg will not be put on the proper meds that could help improve or prevent dementia. His memory loss has definitely declined since our last visit 4 years ago. For example, he is forgetting stories that he has told many times in the past. He would tell the same stories, word for word, over the years, but on this last visit, he kept forgetting pieces of these

stories when he was trying to tell them. He became very repetitive in asking the same questions more than once, forgetting that he had already asked the question and received an answer. We also noticed that he is experiencing problems comprehending things he just read or heard about; it takes him a lot longer to understand things and his memory retention has gotten much worse. It has become very difficult for him to retain certain information that he would like to talk about the next day or days after, i.e.; sports scores and plays that happened during a sports game. His forgetfulness was extremely obvious to us this visit. Greg kept forgetting the prepaid visitor card (that we put money on to pay for food and drinks during the visits) numerous times inside the various vending machines. The only time he remembered that he left the card in the machine was when one of us went to use it to purchase something to eat or drink. He had to keep reminding him to grab the card as soon as he is done using it. We are very concerned about his declining brain functions, memory loss and concentration. Within this past year, Greg was at "work" as a woodworker in the prison and had cut his finger on one of the machines. This accident required him to have to have surgery on his finger.

Greg's hearing, or lack of hearing, is a big concern of ours. We have noticed while talking on the phone with him that his hearing was getting worse but during our visit, it became very obvious that Greg could barely hear anything we said to him. He is completely deaf in one ear, his left ear we believe. When you are talking with him, he must turn his head to the side of the good ear to hear what is being said to him. My husband and I truly believe this is a hazard to his health. The reality is that he lives in a state penitentiary and at any moment an inmate can come up from behind him and make an attempt on his life without Greg hearing anything going on behind him.

Our biggest health concern is the fact that Greg can barely eat without choking. He has to break down bread and other food into small pieces so he can eat it and be able to swallow and not choke. It's becoming harder and harder for him to eat. His dry mouth is getting worse, which is one of the reasons why he has problems eating. It has gotten so bad that he cannot even eat with general population anymore. But he MUST eat with at least one other person; he cannot eat alone. Greg has previously had multiple choking incidents and has needed CPR performed on him twice already. Over the course of 4 years, from the last time we saw Greg in 2015 until now (2019), he has been supposedly getting healthier but yet he physically looked much worse to me this time compared to 2015. He was much thinner; he has become too thin and frail looking. When I gave him a hug, all I felt was the bones in his shoulders, chest and back. He looked like he had aged more than 10 years and it's really only been 4 years.

My husband and I also request reconsideration of Gregory Scarpa Jr.'s application based on the separate ground that he is over 65 years old, having turned 68 in the beginning of August. Also, he has served 75% of his sentence. He is pretty much stuck between a rock and a hard place- as the old saying goes. Gregory Scarpa is a federal inmate being housed in a state penitentiary. Iowa State Penitentiary is getting paid a good amount of money to house him, but they don't help him when he needs help. For example, when he needs important documents printed or copied from the computer, they won't help him at the state prison. He recently needed to download a very important PDF file from his lawyer or someone important regarding his legal case and it became a huge issue to get it downloaded and seen by Gregory. The usual excuse is that he's a federal inmate staying at a state penitentiary and help is very

hard for him to come by. The previous woman Warden at Iowa State Penitentiary denied his Compassion Form before she retired, even though she really had no authority to deny it anyway because she was a State Warden- not a Federal Warden. She should have just passed it along without a "Denied" stamp to the proper person in charge of the Compassion Forms at the Federal level. It seems like some people at the state prison level say they can't help him, but yet have no problem hindering anything he is trying to do for legal purposes.

Gregory's family needs him home and he needs his family and loved ones now more than ever. Greg's fiance DeAnna and his family, especially myself and my husband, Greg's only son, Gregory Scarpa 3rd, will take 100% full responsibility of Greg and his whereabouts at all times, should he be let out. He has been in prison since 1988, it is time to let him out to be with his family for the remaining years of his life. Thank you for your time regarding this issue.

Sincerely,

Gregory Scarpa 3rd and Danielle Scarpa

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and account on a section of the contract of th	My name is maria scarpa.
e makananikanikanikani makanani	I'm Writing for my father
	Gregory Scarpe JR.
	He has applied for compassionate
<u>.</u>	release and was denied.
	I'm asking with all my heart
	for you to reconsider the
	decision made: 1000 to not
a .	release My father on the
	assumption that he is indepedent.
	From my understanding
And the second s	My father qualifies because
	he has done more than half
and the contract of the contra	his time, he is almost 70 years
	old With Many health conditions.
	I would like to give you my
	Personal experience with my
· · · · · · · · · · · · · · · · · · ·	father over the years.
	He has been losing his Memory
	and appears to be getting worse.
	He has Said to me on several
	different occasions "Who is Mikey"?,
: 	When I was referring to my son
	his Grandchild who has been

	Visiting him with myself every
	year for five years now.
	Only from lost year until now
	my father has forgotten many
	things Storys of things that
F=0.	happened in the Past that was
	told to me by him Since I was
	a child. He has no recollection of
•	My fathe carpat eat his food
	on his own without another inmate
	with him because of lack of
	Saliva from all the treatments
	he recived from the Cancer
	I'm worried that he will
	eventually Choke on his Food.
	My father has a Job Where
	he forgot what he was doing
	and cut his finger so back that
	he needed Surgery. Without his
	300 he will have nothing in there
	Yet I don't Know for how much
	longer he can work.

	I ask from my heart to
	Please reconsider these matters,
	and allow My father to get
	the Support and care he needs
***************************************	from his family out of the
	harsh Conditions be is under-
	Sincerely
	MADinSrep
Agency and the second s	
	<u> </u>
	I

(mg. 28,2019

Alex Mr. Franky, I would leke to introduce. myself. Thy mane is Deboral Colori, the Distil 4 Lingson Scarpe Jr. # 6767058 Deisibed my heather aug. 17, 18, 2019. It has been 3 years pines I've sun him I couldn't believe his decline since his throat cases. He has lost weight because he is walk to lat hard front. He has ince that Causes hem! to choke on his freet because the spoods have to be percell and Church real good to go down properly Use noticed his menty in not the home. He is forgetting impertant linue's and conversations, sometimes, dates that are important and repeating himself on thephone language thous. The breatly 12 showing the same pattern is ny futher died with dementer. one, side, you have to be on that pick

peconsider the compassionate release so that I can take care of him in my home. I feel he exued be in a better environment health wise.

Sciency yours, Deborah Colon August 28, 2019

Kansas City Residential Reentry Office Federal Bureau of Prisons 400 State Avenue Tower 2, Suite 800 Kansas City, KS 66101

To Whom It May Concern:

I am writing on behalf of my cousin, Gregory Scarpa, Jr., regarding the appeal of his request for a compassion release. As you know, Greg has battled a very serious cancer and his cancer is now in remission. However, my concern with Greg staying in prison is that he has difficulty swallowing his food. He is not able to eat the majority of the food served in the prison because of this problem. Even though he is given extra time to eat, it doesn't matter because he has trouble swallowing. As a result, he is extremely thin. Actually, he's a shadow of what he once was. I observed on my last visit to him, this past July, how difficult it is for him to eat. I had him choose food from the vending machines provided so he could eat something during our visit. He chose what he thought he might be able to eat and wasn't able to finish it because of the swallowing. It wasn't even a big meal. My concern is that he needs to have some weight on him so he can make it through treatments should his cancer return. If he were home, his meals would consist of those things he can eat so he can gain some weight. This cannot happen in prison for the obvious reason that they can't cook something special for him with all the people they have to feed. If he were not in prison, he could eat smaller meals of those things that are easier to swallow and eat more than three times a day so he could put on some weight and be prepared for treatments should he need them. Greg has kept a positive attitude throughout this ordeal but, unfortunately, a positive attitude does not add pounds to the body. Another thing I noticed about Greg during our visit is that he's forgetting things we have already discussed and he had some difficulty keeping up with what we were saying. I found myself having to explain things a lot more than when I visited him in the past. I know age is a factor but I'm eight months older than Greg so I was surprised I was having to slowly explain things to him. I'm concerned this could cause him some problems while in prison.

Please reconsider releasing him as he has served more than half his sentence and has to wake up every day in prison wondering if his cancer will return and how his body will handle it. Greg and I are close in age and even though I'm healthy, I know I'm on a downhill slope. I can't imagine what it would be like to wonder, while in prison, if the cancer might return and know that because I am lacking in weight due to not being able to eat many of the meals served, I might not survive the treatment.

I appreciate the time you have taken to read my letter and giving some thought to what I have said.

Linda Cordero

INFORMATION For the BOP

Who AM I going To Be Living With?
My Sister Debbie Colosi - Her address is as Follows
3300 South Ocean BLVD. (UNIT 5200)
HighLand Beach FL 33487

IF Release How Am I going to Pay For my Residence and Medical care?

First I would Be Residing at the above address With my Sister Debbie Colosi - She is very Supportive Emotionally a Spiritually and is willing to cover my monthly cost of Living (ie monthly Rent & Foot)

AS For my Medical care goes - I would First apply For Medicare along with a Supplamental Health Plan

AM I going to Seek Employment? Yes To The extent My Health Permitts me to Work

Dear BOP - you may Have already received Information Regarding Where I will Be seeking employment Should I Be granted Compassionate Release Due to my declining Health. I was Just offered Another JoB opportunity that I Believe Would Be Better Suited For me (Health reasons)

Prease See the Following Information that I will Provide on the Following Page The Home in which I would be Residing, the Home of My Sister & Brother Inlaw at the Florida address 3300 South Ocean Blud. (UNIT Saoc) - Highland Beach FL. 33487 The TOB Offered To me as a Billing Clerk, Preparing and issuing invoices to all customers - Inventory maintaining & Storing Inventory Electronically including Sales. The Two Combined Businesses are owned by my Sisters Hus Band Joseph Colosi - The Businesses are Based in New Yersey;

OCERN Feed & Way Side Trucking
28 ONKWOOD Drive
HOWELL NJ 07731
OWNER/MANager Joseph Colosi # 732267 6486

Sincerely Gregory Scarpa TA Gregory Scarpa Ju

Case 1:94-cr-01119-ERK Document 1049-1 Filed 10/30/20 Page 27 of 70 PageID #: 2100

U.S. Department of Justice Federal Bureau of Prisons Kansas City Residential Reentry Office

Administrative Remedy Request BP-229 - Response

Admin Remedy Response

This is in response to your Request for Administrative Remedy received in our office on September 4, 2019, in which you request reconsideration of your RIS request.

A review of your medical record finds you are independent and are not experiencing deteriorating mental or physical health that substantially diminishes your ability to function in a correctional environment. Further, your current facility is able to manage your medical needs at this time.

Based on the above information, your Request for Administrative Remedy is denied

If you are dissatisfied with this response, you may file an appeal with the Residential Reentry Sector Administrator; Federal Bureau of Prisons; 400 State Ave, Tower II, Ste 800; Kansas City, Kansas 66101, within twenty (20) calendar days of the date of this response.

9/4//9 Date

Gregg Fearday,

Acting Residential Reentry Manager

Case 1:94-cr-	01119-ERK Document 1049-1 Filed 10/30/20 Page 28 of 70 PageID #: 21
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	Lim Dorry to Day I had alim distatisfied
	with the responde of received Dated 9/4/19 - It toto
	That after reviewing my medical records Jim
	independent and are not experiencing deteriorating
	mental of physical bealth That substantiaco,
	dimenishes my ability to function in a correctional
•	environens
	I'm sending copies, 3pages from my BP9
	With \$4 ATTAChments (Letters from other Trimates) also
	Peare attach approx 5 Latters from family that
·	herently visited me at the Town STATE BOTTENTIARY. The
	mames I believe are Linia Cooders, Debbic Colori, Marin Songo
	Gregory Scarpa III & DEANINA BERNETT - I WOULD LIKE TO ATTACK
 	Them To This BP10 - Think you
	el Cannot arque an experts opinion on matter
	which he is for more educated offen myself - However
	to delive in this appeal you blould look as the
	solarity of all these moderal issues togother along
	and not independently as I believe the expert did
	one medical Condition alone may not purly
	Or the defended as a deteriorating mental or physical
	doolth Issue But Surely the numerous medical
	I have, when viewed in it's entirity
	I m unable to function mormally to a prison
	and someone I request that you please recombider
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Case 1:94-cr-01119-ERK Document 1049-1 Filed 10/30/20 Page 29 of 70 PageID #: 2102

U.S. Department of Justice Federal Bureau of Prisons North Central Regional Office

Regional Administrative Remedy Appeal Part B - Response

Administrative Remedy Number: 1006134-R1

This is in response to your Regional Administrative Remedy Appeal dated January 15, 2020. You are requesting re-consideration of your Compassionate Release/Reduction in Sentence.

We have reviewed your Regional Administrative Remedy Appeal and official documentation related to your appeal. Based on this review, we concur with the manner in which the Acting Residential Reentry Manager addressed your concerns.

Based on these findings, this response to your Regional Administrative Remedy Appeal is for informational purposes only.

If you are dissatisfied with this response, you may appeal to the Office of General Counsel, Federal Bureau of Prisons, 320 First Street, NW, Washington, DC 20534. Your appeal must be received in the Office of General Counsel within 30 days from the date of this response.

02-11-2020

Date

Stacy Rimmer, Central Sector Administrator

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Kiosk Messages From 09/19/2019 To 10/15/2019 - All Mailboxes

6767058 - Gregory Scarpa, Jr	Scarpa, Jr				Cas
Message Date	Author	Mailbox	Subject	Text	Status
09/19/2019 8:25 am	Offender	Health Services - Nonsick Call	Records, Debbie Householder	Hello Ms. Householder, this is a request to please put together copies of record dated from 2015 (post my cancer surgeries) atong with my Medical towa City trips, other words just what I've been treated for I understand I will have to pay what-ever fee it calls for Thank You	L:94-cr-
09/19/2019 8:36 am	Offender	Health Services - Sick Call	Appointment w/Dr. Miller	I find myself choking much more than usual while i eat, even food as soft as ice- cream, lowa Dity recommended that they should be informed if this should happen, it's a sign that a growth may be developing again Thank You Gregory Scarp 6767058	-91119 Sead Wead
09/19/2019 10:26 pm	JONATHAN.WOOD	Health Services - Nonsick Call	Records, Debbie Householder	You will need to submit this request in the "Medical Records Request" section in the kiosk for addressing and processing. Thank you, Jon Wood RN.	Read Kead
09/20/2019 7:45 am	JULIE.WOOLEVER	Health Services - Sick Call	Appointment w/Dr. Miller	I will schedule you for sick call. Julie Woolever RN	.Read
09/22/2019 10:46 am	Offender	Medical Records Request	Ms, Householder	Hello Debbie, request to please put together copies my medical records dated from 2015 to present Thank You Gregory Scarpa 6767058	Read IU200
09/22/2019 10:57 am	Offender	Health Services - Admin	Tasha(HECC)	Hello Tasha, can you please inform me whether or not the Federal B.O.P. requested medical information in regards to me or were my Medical records handed or sent to them Thank You Gregory Scarpa 6767058	ment ge ge
09/24/2019 4:20 pm	TASHA,WHALEN	Health Services -	Tasha	No nothing recent.	1049 Peag
				i know several years ago mey did but again notning recent. Tasha)-1
09/27/2019 9:38 am	DEBRA.HOUSHOLDER	Medical Records Request	Ms, Householder	I received your release of information form. Thank you for filling that out. Are you just wanting your lowa City records or all medical? Are you wanting mental health records? Is this to go to Deanna Bennett and are you paying or is she? The cost is \$15.00 per hour plus .15 per page copied. I will have to let you know the cost when I am done.	Filed 10/30
09/30/2019 7:43 am	Offender	Medical Records Request	Debbie Householder	Thank you for your response I'm requesting all medical records as well as lowa City m. records including Hernia Surgery resulting w/Blood Clot I understand the 15 cents a copy, as for the 15.00 an hour can you please give me an approx. of how long in time this would be? As of what i understand Deanna Bennett is going to lay out the \$\$\$ & then forward the cost to my lawyer Thank You)/20 Page
09/30/2019 9:15 am	Offender	Case Manager	Dave Foehring	Hello Dave, I request to know whether or not you gave anyone associated with the Federal B.O.P. Any information regarding my medical or physical or even your opinion of any sort of my status of health & or if I'm independent?? Thank You Sir	e 30 of 7
09/30/2019 10:01 am	DAVE.FOEHRING	Case Manager	Dave Foehring	I spoke with Gregg Fearday around 8-7-19 when I kiosked you the questions he wanted answered. We may have briefly discussed your current tier 3 status and what it entails: I don't recall the specifics beyond that	70 Pa
10/03/2019 10:22 am	DEBRA.HOUSHOLDER	Medical Records Request	Debbie Householder	I don't know the cost yet, There are quite a few records to copy. I will let you know as we have to have the money hefore we can send it	3leg
10/04/2019 11:12 am	Offender	Medical Records Request	Debbie Householder	That's Fine, Thank You very much	Read :# C
10/08/2019 12:02 pm	DEBRA.HOUSHOLDER	Medical Records Request	Debbie Householder	You are wanting Nurses notes, Dr. notes, lowa City notes from 2015 to present?	2103 Read Read
lowa Department of Corrections		Denotes, Rem	Page 1 of	S TO STANK TON TONGOOD STANK T	0/15/2019 8:11 am

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J.S. Department of Justice	Contidi Cilio	e Administrativo	7 11
Pederal Bureau of Prisons			
ype or use ball-point pen. If attachments are needed, submit four	copies. One copy each of the	completed BP-DIR-9 and	BP-DIR-10, including any att
nents must be submitted with this appeal. Gregory Scarpa Jr.	Fed-10099050 State-6767058	HU3-A102	Iowa State Penitentia
LAST NAME, FIRST, MIDDLE INITIAL	REG. NO.	UNIT	INSTITUTION
PART A-REASON FOR APPEAL First, I challenge the title RN which is level of m Reentry Manager (ARRM). Mr. Fearday used this lone of this process. An RN is not a Doctor. Idetermination on my numerous medical comperate/function in the normal daily prison setting fecond, I challenge the way in which Mr. Fear determine his decision in denying my application fasha Whalen). I was informed that the only in manager Dave Foerhing at the Iowa State Penitenused in the housing unit. (See Attachment: 1 by Medical records and makes one round at my living ife is impacted by my medical conditions at the formation was forwarded from ISP medical of Whalen). I confirmed this through ISP staff Tasha the ROD confirmed this through ISP staff Tasha thr	level of training to perful challenge whether a ditions in their totally without referring to not a some some some some some some some some	form the fact finding in RN's training is lity and how the my medical records. It medical informations (BP-9 & 10) (See ame from Mr. Fear functioning at the poerhing informed ram not there and dot in which I live. Anday (see Attachmaistrator of ISP who	g/Decision making in standard sufficient to make to sufficient to make to a sufficient my ability ation which was used to a Atachmnet: 1 Section day questioning my caprison in the level systeme he cannot review makes not see how my da Additionally, No mediant: 1-section by Tas informed me that no o
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Central Office Administrative Remedy Appeal-Continued (pg2)

(Gregory Scarpa Jr.)

This means neither Mr. Fearday (BP-9) nor Stacy Rimmer (BP-10) did not make their decisions through my medical records being reviewed and couldn't make that decision with any medical certainty and should not have denied my request for this compassionate release. I believe if any other medical records were reviewed by Mr. Fearday or Stacy Rimmer other than that of ISP records, then I would appeal to the fact that it is an incomplete record to draw an opinion on this process.

Third, I meet the qualification for approval of RIS. RIS requirements are: (1) age-over 65 (I am 68); (2) having over 50% of your sentence completed —Which I have-32 years straight in prison; (3) Serious Medical Conditions;

"First, I cannot eat with the general population and always need to eat with someone as I am not independent at meal time because of the throat and neck cancer due to the possibility I can choke to death. Also, the reason I eat slow, choking is a frequent occurrence, as I have limited saliva and frequent vomiting issues. Second, I cannot eat 80% of the meals prepared by the prison because of my medical issues, for the same reasons stated.

The prisons had replaced my hot meals with cold cuts for the last five years. Third, this matter is becoming more severe as time passes and I am concerned sometime soon I could choke to death. Fourth, I have also suffered nerve damage. I have cognitive decline, simply put it is the early stages of dementia caused by Alzheimer, which, I am now taking medication for. These matters I speak on can be verified by ISP Prison medical staff. Fifth, I also suffer with a hypothyroid issues making maintaining weight difficult and I have a hearing problem which is increasingly becoming worse. Sixth, I have had 5-hernias in the past 12-years, psoriasis causing skin issues, high cholesterol issues, arthritis/joint pain, foot issues, and sciatic nerve issues. In addition I am now taking medication for an enlarged prostate. All issues are serious and cumulative in severity with my aging."

Bottom line Death is creeping up on me and I beg for the compassion needed to approve this release and to give me the opportunity to spend the last years with my family and those I love.

My medical issues & records where ignored in this process or at minimum an incomplete review. I beg the decision makers to view my medical conditions through the actual medical files, which_now_include dementia as an additional medical condition since this application was prepared, and ask you to view all my medical conditions together in its totality because they are affecting my ability to function as a normal prisoner. This is a compassionate release program, the only missing ingredient required to approve the appeal is compassion. Please approve.

APR 3 4 2020

Lastly, I have attached letters of my family, those who know me well and live around me to confirm with BOP staff that my condition makes me unable to be independent in the prison setting, see Attachments: 2-8.

Attachment: 01- (section by: Tasha Whalen 09-24-2019 @4:20pm), head of medical records at ISP) Kiosk Message-referencing communications between Tasha Whalen & that the BOP had not contacted her about medical records for "several years".

Attachment: 01- (section by: Dave Foehring on 09-30-2019 10:01am) Where Mr. Foehring states:

("We may have briefly discussed your current tier 3 status"), yet he said nothing on Medical records or medical condition.

Attachment: 02-Son (Gregory Scarpa III) & Daughter in law (Danielle Scarpa)

Attachment: 03 - Sister (Deborah Colosi)

Attachment: 04 - Daughter (Maria Scarpa)

Attachment: 05 - (Prison Clerk) Eric Thompson #1150729

Attachment: 06 – (ISP Prisoner who assists me) Gary Kirchner

Attachment: 07 – (ISP Prisoner who assists me) Denis Gailey

Attachment: 08 - (ISP Prisoner who assists me) Patrick Thompson

Attachment: 09-(BP-10)

REJECTION NOTICE - ADMINISTRATIVE REMEDY

DATE: MARCH 27, 2020,

FROM: ADMINISTRATIVE REMEDY COORDINATOR

CENTRAL OFFICE

TO : GREGORY JR SCARPA, 10099-050

IOWA DEPARTMENT OF CORRECTIONS

2111 330TH AVENUE

FT. MADISON, IA 52627

FOR THE REASONS LISTED BELOW, THIS CENTRAL OFFICE APPEAL IS BEING REJECTED AND RETURNED TO YOU. YOU SHOULD INCLUDE A COPY OF THIS NOTICE WITH ANY FUTURE CORRESPONDENCE REGARDING THE REJECTION.

REMEDY ID : 1006134-A1 CENTRAL OFFICE APPEAL

DATE RECEIVED : MARCH 13, 2020

SUBJECT 1 : OTHER MEDICAL MATTERS

SUBJECT 2 : INCIDENT RPT NO:

REJECT REASON 1: YOU DID NOT PROVIDE A COPY OF YOUR REGIONAL OFFICE

. ADMINISTRATIVE REMEDY APPEAL (BP-10) FORM

REJECT REASON 2: YOU DID NOT SIGN YOUR REQUEST OR APPEAL.

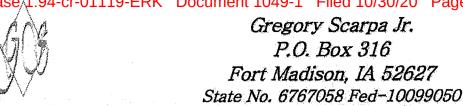
REJECT REASON 3: SEE REMARKS.

REMARKS : ALSO DATE YOUR APPEAL. REGION ACCEPTED YOUR APPEAL

ON 1-28-2020 AND FAILED TO RESPOND, ATTACH COPY OF

MISSING BP-10 FORM & SIGN & DATE YOUR APPEAL.

Case 1:94-cr-01119-ERK Document 1049-1 Filed 10/30/20 Page 34 of 70 PageID #: 2107



Monday, April 13, 2020

Administrative Remedy Coordinator 320 First St. N.W. Washington, DC 20534

Ref: March 27, 2020-Rejection Notice-Remedy ID 1006134-A1

Dear Administrative Remedy Coordinator,

In response to your Correspondence Rejecting the BP-11 you requested the following in order to proceed with this process.

BOP-"REJECT REASON 1: YOU DID NOT PROVIDE A COPY OF YOUR REGIONAL OFFICE ADMINISTRATIVE REMEDY APPEAL (BP-10) FORM"...

SCARPA'S RESPONSE-1: I HAVE ATTACHED (Attachment: 9) A COPY OF THE BP-10 TO THIS PACKET

BOP-"REJECT REASON 2: YOU DID NOT SIGN YOUR REQUEST OR APPEAL." SCARPA'S RESPONSE-2 THE BP-11 APPEAL HAS BEEN SIGNED & DATED AND RETURNED FOR YOUR REVIEW ON 04-13-2020.

I have followed your instruction and responded with needed signatures & dates on all relevant forms.

I apologize for the errors and hope this assist you in your review.

Sincerely,

A.34

Case 1:94-cr-01119-ERK Document 1049-1 Filed 10/30/20 Page 35 of 70 PageID #: 2108

U.S. Department of Justice

Federal Bureau of Prisons

Application Requesting Home Confinement through First Step Act-&-CARES Act-For Elderly Offender-Due to Covid-19

•				
	البيني الباران المعمولة والأرادان أأجابك فيقتاه بالمنادات ويحببني وسياد	State-6767058	Agreement of the second of	(ISP)
From:	Scarpa, Gregory Jr.	Fed-10099050	HU3A102	Iowa State Penitentiary
	LAST NAME, FIRST, MIDDLE INITIAL	REG. NO.	UNIT	

Comes Now the above Federal offender who is currently placed in a state facility for BOP reasons, and files this application in reference to the US Attorney Generals Memorandum to the BOP regarding the increasing use of home confinement and expanding to include the CARES Act which authorized the Attorney general "to expand the cohort of inmates who can be considered for home release..." and I, Gregory Scarpa states the following grounds to grant this instrument for Home Confinement under the Elderly Offender criteria -Due to Covid-19:

- Age Requirements are 60 or above:
 I Gregory Scarpa am currently 68 years old (D.O.B.08-03-1951)
- II. Medical Requirements are: (Asthma-Heart Disease-Lung Issues- Diabetes-Weakened Immune System-Cancer Treatments-High Blood Pressure)

I Gregory Scarpa Jr. Currently have the following qualifying conditions:

- 1. Weakened immune system; this was caused from chemotherapy and radiation Administered after 2-serious surgeries.
 - a. First; an 8-hour surgery on my neck for cancer;
 - b. Soon after, a 5-hour Surgery on my throat for additional large tumor; and
 - c. Low white blood cell count, causing me to be highly susceptible to infection and pneumonia.
- 2. High Blood pressure
- 3. Cancer (Melanoma) evaluation appointment was pending and placed on hold because of Covid-19.
- **4. Additional medical conditions** causing continued hard ache as an elderly prisoner:

"First, I cannot eat with the general population and always need to eat with someone as I am not independent at meal time because of the throat and neck cancer due to the possibility I can choke to death. Also, the reason I eat slow, choking is a frequent occurrence, as I have limited saliva and

frequent vomiting issues. Second, I cannot eat 80% of the meals prepared by the prison because of my medical issues, for the same reasons stated. The prisons had replaced my hot meals with cold cuts for the last five years. Third, this matter is becoming more severe as time passes and I am concerned sometime soon I could choke to death. Fourth, I have also suffered nerve damage. I have cognitive decline, simply put it is the early stages of dementia caused by Alzheimer, which, I am now taking medication for. These matters I speak on can be verified by ISP Prison medical staff. Fifth, I also suffer with a hypothyroid issues making maintaining weight difficult and I have a hearing problem which is increasingly becoming worse. Sixth, I have had 5-hernias in the past 12-years, psoriasis causing skin issues, high cholesterol issues, arthritis/joint pain, foot issues, and sciatic nerve issues. In addition I am now taking medication for an enlarged prostate. All issues are serious and cumulative in severity with my aging."

I request this be placed into the appropriate hands of the BOP for consideration for home confinement. I ask that the following statement from the Centers for Disease control is considered, which states:

"In response to the worldwide covid-19 pandemic, the Centers for Disease control consider the most vulnerable to include people over 65 years old, and people with conditions that affects their lungs, heart ,kidney, immune system or who have other serious chronic medical condition."

I qualify under both your standards and the standards set forth by the Centers for Disease control to be placed in home confinement and I request that I be placed in the home confinement.

Lastly, I bring to you the meaning of an Act Of God and the language used: "TEXT: 1. an unusual, extraordinary, sudden, and unexpected manifestation of the forces of nature which man cannot resist."

Aregory Scorpe fr.	Dated: <u> </u>	
Gregory Scarba Jr.		
P.O. Box 316		
Fort Madison, Iowa 52627		
Upon receipt of this docume return a copy to Applicant Gregory lowa 52627	ent please fill in the information below and y Scarpa Jr. at P.O. Box 316, Fort Madison,	
Date received by the BOP:	-2020	
Name of BOP recipient:		
Last Name, First Name	Job Title	

Submitted by,

Administrative Remedy No. 1006134-A2 Part B - Response

This is in response to your Central Office Administrative Remedy Appeal where you challenge the denial of your request for a Reduction in Sentence (RIS). You claim to be eligible for a RIS due to your age and medical conditions. For relief, you request a RIS.

Title 18 of the United States Code, § 3582(c)(1)(A), allows a sentencing court, on motion of the Director of the Bureau of Prisons (BOP), to reduce a term of imprisonment for extraordinary and compelling reasons. Program Statement 5050.50, Compassionate Release/RIS: Procedures for Implementation of 18 U.S.C. §§ 3582(c)(1)(A) and 4205(g), Sec. 3(b), states consideration for a RIS may be given to an inmate who suffers from a "debilitating medical condition" when the inmate has an incurable, progressive illness or suffered a debilitating injury from which he/she will not recover, and the inmate is: (1) completely disabled, meaning the inmate cannot carry on any self-care and is totally confined to a bed or chair; or (2) capable of only limited self-care and confined to a bed or chair for more than 50% of waking hours. Additionally, pursuant to Sec. 4(b), "Elderly Inmates with Medical Conditions", consideration for a RIS may be given to inmates who meet the following criteria: age 65 or older; suffers from chronic or serious medical conditions related to the aging process; experiencing deteriorating mental or physical health that substantially diminishes their ability to function in a correctional facility; conventional treatment promises no substantial improvement to their mental or physical condition; and have served at least 50% of their sentence.

We have carefully reviewed your request and determined the Warden properly found you do not meet the criteria for a RIS on the basis of the available information. Medical records indicate you are a 65-year old male with a history of throat and neck cancer, hyperlipidemia, hyperthyroidism, and lower back pain. Records show that you have been clear of throat and neck cancer for three years. Your other medical conditions are monitored and treated through chronic care evaluations and sick call appointments. Your condition is being managed and is currently stable. You can independently perform your activities of daily living. As such, you do not currently meet the criteria for RIS.

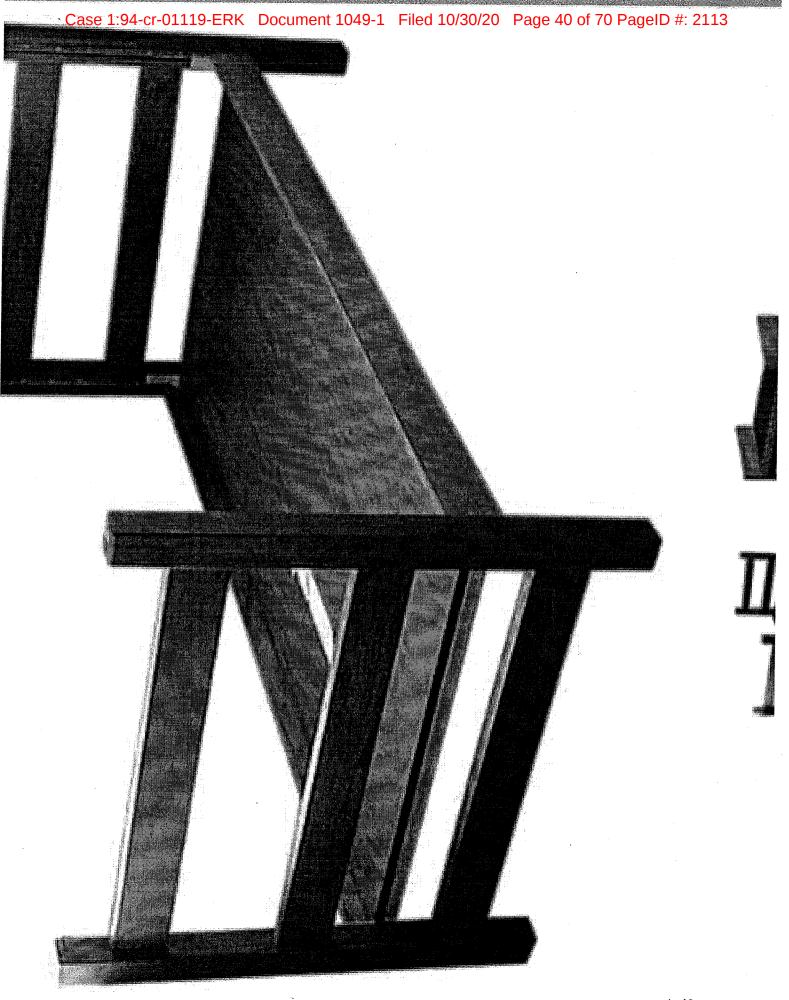
Accordingly, your appeal is denied.

7/1/2020

Date

Ian Connors, Administrator National Inmate Appeals

This certification of anufacturing Supervisor	CERTIFICATE OF COMPLETION"	This certificate is awarded to	For the completion of the Lean (PIMS) course of the Manufacturing Systems at Ft. Madison, Iowa.	(- 2-4/- 19 Date	
CERRICOLOGICALISTS OF THE STATE	CERTIFICAT	This ca	For the completion Iowa Industries Manufac	Lean Manufacturing Supervi	XXXXXXX



Department of Corrections Health Services

Work Classes



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			le Bunk of 3 Bunk Bed		Ground Floor	DCG
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No Restriction	No Sports A	ctivity				
RESTRICTION F	黟	g/Jogging	X Contact/Tea	m Sports	Weightliftin	
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WORK:				······		
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Standing for more	re than hours				Walking over fe	
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Other:				-	_ Work Requiring San	ety books
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ame:	Scarpa, Gregory		Number: 6	767058	Unit:	HU3A
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Origination: September 2009.

Printed: 03/04/2020 13:54 by jon.wood

Department of Corrections

HSF - 508

Page 1 of 2

A.41

Definitions of Restrictions

Medically/Psychiatrically Unassigned applies to offenders restricted from work due to a medical or psychiatric condition.

Sedentary Work Only -- work that is limited to a seating position and does not require strenuous activity.

Ladders/Step Stools work requiring climbing ladders, step stools, work on scaffolding or steep inclines. Typically applies to individuals with seizure disorders, or other conditions affecting balance or stability in movement.

Potentially Dangerous Machinery -- work near machinery or equipment that has the potential for causing injury through inadvertent contact resulting from reduced or complete loss of consciousness, coordination or balance. Typically applies to individuals with seizure disorders or other conditions affecting alertness, balance or stability in movement.

Bending/Stooping/Squatting -- work requiring repetitive or frequent bending or stooping at waist or squatting. Typically applies to individuals with severe obesity, back problems, vertigo, arthritis, internal derangement of the knee, etc.

nours work requiring standing for the specified number of hours.
Lifting more than pounds work requiring lifting the specified number of pounds.
Push/pull more than pounds work requiring pushing or pulling the specified number of pounds.
Walking over feet work requiring walking the specified the number of feet.

Repetitive Use of Hands -- work requiring repeated or prolonged grasping, pulling, typing, etc. Typically applies to individuals with joint problems, carpal tunnel syndrome, tendonitis etc.

Work Above Shoulders -- work above the level of the shoulders. Typically applies to individuals with limitations of the movement of the shoulder joint.

Exposure to Loud Noise -- work in areas where there is frequent or sustained high volume ambient noise. Typically applies individuals who have established hearing loss or severe anxiety disorder.

No Food Service Work — work in areas of food preparation. Typically applies to individuals with diseases that could be transmitted via food products.

Dusty Conditions - work in environments that produce exposure to increased levels of inhaled dust particles.

Exposure to Chemicals -- work in environments that produce exposure to inhaled respiratory irritants, fumes, smoke cleaning detergents or other chemicals.

No Work Requiring Safety Boots.

Origination: September 2009.

Printed: 03/04/2020 13:54 by jon.wood

Department of Corrections

Page 2 of 2

HSF - 508

A.42

Department of Corrections Prescription Report

Current						
Doctor	Rx#	Drug/Sig	oteo treto	100		
Miller, Dennis DO	190048	Metoprolol 50mg XL tablet - 50 MG (1 x 50MG) po qd for HTN	05/27/2020	11/22/2020	Kelease Date Oty 1.00	y Reason
Keller, Gregory DO	189794	Donepezil 10mg tablet - 10 MG (1 x 10MG) po qHS for dementia	05/21/2020	11/16/2020	1.00	00
Keller, Gregory DO	189793	MiRTAZapine 30mg tablet - 30 MG (1 x 30MG Tab(s)) PO at HS PRN for anxiety	05/20/2020	11/15/2020	1.00	00
Miller, Dennis DO	189415	Tamsulosin 0.4mg capsule - 0.4 MG (1 x 0.4MG Cap(s)) PO at HS	05/11/2020	11/06/2020	1.00	00
Miller, Dennis DO	189412	Levothyroxine 150mcg tablet - 150 MCG (1 x 150MCG) po qd	05/11/2020	11/06/2020	1.00	00
Miller, Dennis DO	189403	Simvastatin 20mg tablet - 20 MG (1 x 20MG) po qHS	05/11/2020	11/06/2020	1.00	10
Miller, Dennis DO	189409	Aspirin EC 81mg tablet - 81 MG (1 x 81MG) po qd	05/11/2020	11/06/2020	1.00	01
Miller, Dennis DO	189400	Moisture Lotion FF - Apply to affected area QD for dry skin	05/11/2020	11/06/2020	1.00	0,
Miller, Dennis DO	189406	Clobetasol 0.05% Cream - Apply to affected area QD for psoriasis	05/11/2020	11/06/2020	1.00	0
Miller, Dennis DO	189410	Fixodent Original Dental Adhesive Cream - Use for dentures daily as directed	05/11/2020	11/06/2020	1.00	0
Miller, Dennis DO	189405	Psyllium Fiber Packet (Leader) - 1 Packet mixed in water bid PRN for constipation	05/11/2020	11/06/2020	2.00	0
Miller, Dennis DO	189404	Carnation Nutritional Supplement - Use twice daily for nutritional supplement	05/11/2020	11/06/2020	2.00	0
Miller, Dennis DO	189401	Carnation Nutritional Supplement - 3 packets daily	05/11/2020	11/06/2020	3.00	0

Department of Corrections Prescription Report

		Orrender Name: Scarpa, Gregory Jr	_				
Current							
Doctor	Rx#	Drug/Sig	Start Date	Ston Date	Polosco Date	į	Ē
Miller, Dennis DO	189402	Pilocarpine 5mg tablet - 5 MG (1 x 5MG) po tid PRN for dry mouth	05/11/2020	11/06/2020	ivelease Date	3.00	Keason
Miller, Dennis DO	189407	Biotene Dry Mouth Rinse - Rinse as directed three times daily or as needed for dry mouth	05/11/2020	11/06/2020		3.00	
Miller, Dennis DO	189408	Biotene Dental Paste - Use as directed	05/11/2020	11/06/2020	Water References therefore day to assist the stands of	3.00	
Miller, Dennis DO	189414	Antacid Anti-Gas Suspension - Shake well and take 30 mL by mouth at bedtime PRN **LIMIT OF 2 BOTTLES PER MONTH**	05/11/2020	11/06/2020		30.00	
Miller, Dennis DO	189411	GABApentin 800mg tablet - 1600 MG (2x800MG) po bid	05/11/2020	11/06/2020		4.00	Andrews and the state of the st
Miller, Dennis DO	189413	IBUprofen 800mg tablet - 800 MG (1 x 800MG) po q6h PRN	05/11/2020	11/06/2020		4.00	
Keller, Gregory DO	188687	Atomoxetine 80mg capsule - 80 MG (1 x 80MG) po qAM for concentration / focus (start 4/24/2020)	04/24/2020	10/20/2020	dia di series de desta de desta de desta de desta de desta de	1.00	de de cale part e cale me cale cale de
Past History							
Doctor	Rx#	Drug/Sig	Start Date	Cton Date		į	í
Keller, Gregory DO	1	MIRTAZapine 30mg tablet - 30 MG (1 x 30MG Tab(s)) PO at HS PRN for anxiety	02/19/2020	05/20/2020	Neledse Date	1.00	Prescription Pensing
Miller, Dennis DO	183201	Moisture Lotion FF - Apply to affected area QD for dry skin	01/08/2020	05/11/2020	Arritation of their strikes White Law to willing practice and	1,00	Prescription
Miller, Dennis DO	182228	Antacid Anti-Gas Suspension - Shake well and take 30 mL by mouth at bedtime PRN **LIMIT OF 2 BOTTLES PER MONTH**	12/06/2019	05/11/2020		30.00	Prescription Renewed
Miller, Dennis DO	181898	Tamsulosin 0.4mg capsule - 0.4 MG (1x 0.4MG Cap(s)) PO at HS	11/27/2019	05/11/2020	mandales and the second se	1.00	Prescription Renewed
Contains of the second contains							

Department of Corrections Prescription Report

Past History						
Doctor	Rx#	Drug/Sig	Start Date	Stop Date	Release Date Oty	Research
Miller, Dennis DO	175218	Carnation Nutritional Supplement - 3 packets daily	06/26/2019	05/11/2020	1	Prescription
Miller, Dennis DO	174814	Levothyroxine 150mcg tablet - 150 MCG (1 x 150MCG) po qd	06/19/2019	05/11/2020	1.00	Prescription
Miller, Dennis DO	174804	Simvastatin 20mg tablet - 20 MG (1 \times 20MG) po qHS	06/19/2019	05/11/2020	1.00	Prescription
Miller, Dennis DO	174809	Aspirin EC 81mg tablet - 81 MG (1 x 81MG) po qd	06/19/2019	05/11/2020	1.00	Prescription Renewed
Miller, Dennis DO	174805	Clobetasol 0.05% Cream - Apply to affected area QD for psoriasis	06/19/2019	05/11/2020	1.00	Prescription Renewed
Miller, Dennis DO	174811	Fixodent Original Dental Adhesive Cream - Use for dentures daily as directed	06/19/2019	05/11/2020	1.00	Prescription Renewed
Miller, Dennis DO	174806	Psyllium Fiber Packet (Leader) - 1 Packet mixed in water bid PRN for constipation	06/19/2019	05/11/2020	2.00	Prescription Renewed
Miller, Dennis DO	174803	Carnation Nutritional Supplement - Use twice daily for nutritional supplement	06/19/2019	05/11/2020	2.00	Prescription Renewed
Miller, Dennis DO	174802	Pilocarpine 5mg tablet - 5 MG (1 \times 5MG) potid PRN for dry mouth	06/19/2019	05/11/2020	3.00	Prescription Renewed
Miller, Dennis DO	174807	Biotene Dry Mouth Rinse - Rinse as directed three times daily or as needed for dry mouth	06/19/2019	05/11/2020	3.00	Prescription Renewed
Miller, Dennis DO	174808	Biotene Dental Paste - Use as directed	06/19/2019	05/11/2020	3.00	Prescription Renewed
Miller, Dennis DO	174812	GABApentin 800mg tablet - 1600 MG (2x800MG) po bid	06/19/2019	05/11/2020	4.00	Prescription Renewed
Miller, Dennis DO	174815	IBUprofen 800mg tablet - 800 MG (1 x 800MG) po q6h PRN	06/19/2019	05/11/2020	4.00	Prescription Renewed
Keller, Gregory DO	185188	Atomoxetine 60mg capsule - 60 MG (1 x 60MG) po gAM	02/19/2020	04/23/2020	1.00	RX change

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Page 3 of 4

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Start Date Stop Date Sto								
of Gregory Do 188685 Abrug/Sig Start Date Stop Date Release Date Qty Gregory Do 188685 Abomoxetine 80mg capsule - 80 MG (1 x 10MG) 04/30/2020 04/22/2020 1.00 Gregory Do 188684 Donepezil Increase) Donepezil Increase) 1.00 Gregory DO 188686 Abomoxetine 80mg capsule - 80 MG (1 x 10MG) 04/23/2020 04/22/2020 1.00 Gregory DO 188686 Abomoxetine 80mg capsule - 80 MG (1 x 5MG) 04/23/2020 04/22/2020 1.00 Gregory DO 188686 Abomoxetine 80mg capsule - 80 MG (1 x 5MG) 02/20/2020 04/23/2020 1.00 Gregory DO 180827 MIRTAZapine 30mg tablet - 5 MG (1 x 5MG) 02/20/2020 04/19/2020 1.00 Gregory DO 180826 Abomoxetine 60mg capsule - 60 MG (1 x 10/29/2019) 10/29/2019 02/19/2020 1.00 Gregory DO 183200 Nelomycni/Polymyxin/HC Otic Suspension - 10/08/2020 01/08/2020 02/06/2020 3.00 Dennis DO 183199 Sulfamethoxazole/TMP DS (800/160mg) 01/08/2020 01/15/2020 01/15/2020	Past History							
Gregory DO 188685 Atomovetine 80mg capsule - 80 MG (1 x 804) Start Date 80tp Date 80mg capsule - 80 MG (1 x 804) Start Date 80tp Date 80mg capsule - 80 MG (1 x 804) Start Date 80tp Date 80	Doctor	Rx#		•				
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Page 4 of 4

Department of Corrections

DONEPEZIL - ORAL 9218

(doh-NEP-eh-zil)

COMMON BRAND NAME(S): Aricept

USES: This medication is used to treat Alzheimer's disease.

HOW TO USE: Take this medication orally. It is usually taken once daily just before bedtime. This medication may be taken with or without food.

If you experience sleeping problems (e.g., insomnia), consult your doctor about switching to morning dosing.

It may take a few weeks before the full effects of donepezil are noticed. Take donepezil exactly as directed. Do not stop taking it or increase the dosage unless your doctor instructs you to do so.

SIDE EFFECTS: Donepezil may cause nausea, diarrhea, vomiting, insomnia, muscle cramps, unusual tiredness or loss of appetite. If these effects continue or worsen, contact your doctor.

Unlikely but report: headache, dizziness or fainting, weight loss, vision problems, chest pain, joint pain, depression, unusual dreams, drowsiness, new mental changes, rash, stomach pain, frequent urination, unsteadiness.

Very unlikely but report: slow or irregular heartbeat, slurred speech, seizures, black stools.

If you notice other effects not listed above, contact your doctor or pharmacist.

PRECAUTIONS: Tell your doctor if you have: seizures, liver disease, heart problems, stomach or intestinal problems, lung disease, allergies (especially drug allergies).

Because of the possibility this drug will make you dizzy and affect coordination, do not drive or operate machinery until you get used to the drug's effects. Limit or avoid alcohol intake as it may increase the possibility you will get dizzy or sleepy.

This medication should be used only when clearly needed during pregnancy. Discuss the risks and benefits with your doctor. It is unknown if donepezil is excreted into breast milk. Consult your doctor before breast-feeding.

OVERDOSE: If overdose is suspected, contact your local poison control center or emergency room immediately. Symptoms of overdose may include severe nausea, vomiting, sweating, slow pulse, dizziness, lightheadedness, slow breathing, and seizures.

NOTES: Do not share this medication with others.

MISSED DOSE: Take any missed dose as soon as possible but not if it is almost time for the next dose. If it is time for the next dose, skip the missed dose and resume your regular schedule. Do

not "double-up" the dose.

STORAGE: Store at room temperature between 59 to 86 degrees F (15 to 30 degrees C). Keep away from moisture and sunlight. Do not store in the bathroom.

MIRTAZAPINE - ORAL 4047

(mer-TAZE-uh-peen)

COMMON BRAND NAME(S): Remeron

USES: Mirtazapine is used to treat depression.

HOW TO USE: Take this medication by mouth once daily preferably at bedtime, or as directed by your doctor. The dosage is based on

your medical condition and response to therapy.

It may take up to two weeks before the full benefit of this drug takes effect. Therefore, do not increase your dose or take it more frequently than prescribed. Consult your doctor.

SIDE EFFECTS: Drowsiness, dizziness, dry mouth, constipation, increased appetite, or weight gain may occur. If any of these

effects persist or worsen, notify your doctor.

Tell your doctor immediately if any of these serious side
effects occur: swelling of hands or feet, muscle pain, mental/mood

Tell your doctor immediately if any of these unlikely but serious side effects occur: back pain, shakiness (tremor), increased urination.

Tell your doctor immediately if any of these highly unlikely but very serious side effects occur: persistent sore throat or fever, chills, trouble breathing, chest pain.

If you notice other effects not listed above, contact your

doctor or pharmacist.

PRECAUTIONS: Tell your doctor your medical history, especially of: kidney problems, liver problems, other mental/mood conditions (e.g., bipolar disorder), seizures, heart disease, strokes, high

cholesterol, any allergies.

This drug may make you dizzy or drowsy; use caution engaging in activities requiring alertness such as driving or using machinery. Limit alcoholic beverages.

To minimize dizziness and lightheadedness, get up slowly when rising from a seated or lying position.

Caution is advised when using this drug in the elderly because

they may be more sensitive to the effects of the drug. This medication should be used only when clearly needed during pregnancy. Discuss the risks and benefits with your doctor.

It is not known whether this drug passes into breast milk.

Consult your doctor before breast-feeding.

OVERDOSE: If overdose is suspected, contact your local poison control center or emergency room immediately. Symptoms of overdose include: disorientation, memory problems, unusually fast heartbeat.

NOTES: Do not share this medication with others.

Laboratory and/or medical tests may be performed to monitor your progress.

MISSED DOSE: If you miss a dose, use it as soon as you remember. If it is near the time of the next dose, skip the missed dose and resume your usual dosing schedule. Do not double the dose to catch up.

STORAGE: Store at room temperature between 59 and 86 degrees F (2) Page 1

to 30 degrees C) away from light and moisture.

SCARPA, GREGORY #6767058 Rx# 190048

Read this medicine information sheet carefully each time you get this medicine filled. You must carefully read the "Consumer Information Use and Disclaimer" below in order to understand and correctly use this information. This information is for MALE patients only. It does NOT include important information for FEMALE patients.

Metoprolol Extended-Release Tablets

Pronunciation (me toe PROE lole)
Brand Names: US Toprol XL.

Warning:

 Do not stop taking this drug all of a sudden. If you do, chest pain that is worse and in some cases heart attack may occur. The risk may be greater if you have certain types of heart disease. To avoid side effects, you will want to slowly stop this drug as ordered by your doctor. Call your doctor right away if you have new or worse chest pain or if other heart problems occur.

What is this drug used for?

- It is used to treat high blood pressure.
- · It is used to treat chest pain or pressure.
- · It is used to treat heart failure (weak heart).
- It may be given to you for other reasons. Talk with the doctor.

What do lineed to tell my doctor BEFORE I take this drug?

- If you are allergic to this drug; any part of this drug; or any other drugs, foods, or substances. Tell your doctor about the allergy and what signs you had.
- If you have any of these health problems: Certain types of abnormal heartbeats called heart block or sick-sinus syndrome, heart failure (weak heart), low blood pressure, poor blood flow to the arms or legs, shock caused by heart problems, or a slow heartbeat.
- If you have any of these health problems: Asthma or other breathing problems like COPD (chronic obstructive pulmonary disease).

This is not a list of all drugs or health problems that interact with this drug.

Tell your doctor and pharmacist about all of your drugs (prescription or OTC, natural products, vitamins) and health problems. You must check to make sure that it is safe for you to take this drug with all of your drugs and health problems. Do not start, stop, or change the dose of any drug without checking with your doctor.

What are some things I need to know or do while I take this drug?

 Tell all of your health care providers that you take this drug. This includes your doctors, nurses, pharmacists, and dentists.

- Avoid driving and doing other tasks or actions that call for you to be alert until you see how this drug affects you.
- To lower the chance of feeling dizzy or passing out, rise slowly if you have been sitting or lying down. Be careful going up and down stairs.
- Check blood pressure and heart rate as the doctor has told you.
- Have blood work checked as you have been told by the doctor. Talk with the doctor.
- This drug may affect certain lab tests. Tell all of your health care providers and lab workers that you take this drug.
- This drug may hide the signs of low blood sugar. Talk with the doctor.
- If you have high blood sugar (diabetes), you will need to watch your blood sugar closely.
- If you are taking this drug and have high blood pressure, talk with your doctor before using OTC products that may raise blood pressure. These include cough or cold drugs, diet pills, stimulants, ibuprofen or like products, and some natural products or aids.
- This drug may make it harder to tell if you have signs
 of an overactive thyroid like fast heartbeat. If you have
 an overactive thyroid and stop taking this drug all of a
 sudden, it may get worse and could be life-threatening.
 Talk with your doctor.
- If you have had a very bad allergic reaction, talk with your doctor. You may have a chance of an even worse reaction if you come into contact with what caused your allergy. If you use epinephrine to treat very bad allergic reactions, talk with your doctor. Epinephrine may not work as well while you are taking this drug.
- · Talk with your doctor before you drink alcohol.

What are some side effects that I need to call my doctor about right away?

WARNING/CAUTION: Even though it may be rare, some people may have very bad and sometimes deadly side effects when taking a drug. Tell your doctor or get medical help right away if you have any of the following signs or symptoms that may be related to a very bad side effect:

 Signs of an allergic reaction, like rash; hives; itching; red, swollen, blistered, or peeling skin with or without fever; wheezing; tightness in the chest or throat;

Wolters Kluwer Clinical Drug Information

SCARPA, GREGORY #6767058 Rx# 190048

trouble breathing, swallowing, or talking; unusual hoarseness; or swelling of the mouth, face, lips, tongue, or throat.

- · Low mood (depression).
- · Very bad dizziness or passing out.
- · Chest pain that is new or worse.
- · An abnormal heartbeat that is new or worse.
- · Slow heartbeat.
- Shortness of breath, a big weight gain, or swelling in the arms or legs.

What are some other side effects of this drug?

All drugs may cause side effects. However, many people have no side effects or only have minor side effects. Call your doctor or get medical help if any of these side effects or any other side effects bother you or do not go away:

- · Feeling dizzy, tired, or weak.
- · Diarrhea, upset stomach, or throwing up.

These are not all of the side effects that may occur. If you have questions about side effects, call your doctor. Call your doctor for medical advice about side effects.

You may report side effects to the FDA at 1-800-332-1088. You may also report side effects at https://www.fda.gov/medwatch.

How is this drug best taken?

Use this drug as ordered by your doctor. Read all information given to you. Follow all instructions closely.

- · Take with or right after a meal.
- · Swallow whole. Do not chew or crush.
- You may break the tablet in half. Do not chew or crush.
- Keep taking this drug as you have been told by your doctor or other health care provider, even if you feel well.

What do I do if I miss a dose?

- · Skip the missed dose and go back to your normal time.
- · Do not take 2 doses at the same time or extra doses.

How do I store and/or throw out/this drug?

- Store at room temperature in a dry place. Do not store in a bathroom.
- Protect from heat.
- Keep all drugs in a safe place. Keep all drugs out of the reach of children and pets.
- · Throw away unused or expired drugs. Do not flush

down a toilet or pour down a drain unless you are told to do so. Check with your pharmacist if you have questions about the best way to throw out drugs. There may be drug take-back programs in your area.

General drug facts

- If your symptoms or health problems do not get better or if they become worse, call your doctor.
- Do not share your drugs with others and do not take anyone else's drugs.
- Some drugs may have another patient information leaflet. Check with your pharmacist. If you have any questions about this drug, please talk with your doctor, nurse, pharmacist, or other health care provider.
- If you think there has been an overdose, call your poison control center or get medical care right away.
 Be ready to tell or show what was taken, how much, and when it happened.

Consumer Information Use and Disclaimer

This information should not be used to decide whether or not to take this medicine or any other medicine. Only the healthcare provider has the knowledge and training to decide which medicines are right for a specific patient. This information does not endorse any medicine as safe, effective, or approved for treating any patient or health condition. This is only a brief summary of general information about this medicine. It does NOT include all information about the possible uses, directions, warnings, precautions, interactions, adverse effects, or risks that may apply to this medicine. This information is not specific medical advice and does not replace information you receive from the healthcare provider. You must talk with the healthcare provider for complete information about the risks and benefits of using this medicine.

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IOWA MEDICAL & CLASSIFICATION CENTER PHARMACY

Scarpa, Gregory #6767058 METOPROLOL 50MG XL TABLET

ISP / Housing Unit 3A-Pod

May Make You Dizzy. Check With Doctor Before Drinking Alcohol. Use Care When Operating A Vehicle, Vessel, Or Other Machines.

Take This Drug Preferably With Or Right After A Meal.

Swallow Whole. Do Not Chew Or Crush.

Do Not Take Other Medicines Without Checking With Your Doctor Or Pharmacist.

Take Or Use This Medicine Exactly As Directed. Do Not Skip Doses Or Discontinue Unless Directed By Your Doctor.

Medication Self-Administration Rules

- You are responsible for making sure that the name of the medication on the unit dose packaging you receive is the same as the medication on the label and that the name and ID number on the label are your name and number.
- Keep your medications locked up in your housing area. The only medications you may carry with you are nitroglycerin for chest pain and inhalers for breathing difficulty.
- Do NOT remove your medication from its packaging and labeling until you are ready to take it. Unlabelled and/or unpackaged medication is CONTRABAND.
- · You must turn in all unused supplies of discontinued or unexpired medications to health services.
- Your prescription is valid until the expiration date on the label or until 90 days after your release date, whichever is sooner. You will be given a 30 day supply of medication when you are released; you may have the remainder of the prescriptions transferred to a community pharmacy to be filled at your own expense.
- This packaging is not for households with young children. Do not take this packaging to the visiting room or out of the institution when you are released unless you have signed a Notice of Non-Child-Resistant Packaging Form
- It is YOUR responsibility to take your medication correctly and to reorder it before you will run out. Failure to do so may result in loss of eligibility to participate in the Medication Self-Administration Program.
- Federal law prohibits the transfer of this drug to any person other than the patient for whom it was prescribed. Do not sell, trade, or give your medication to another offender. Violation of this rule can result in a major report and loss of eligibility to participate in the Medication Self-Administration Program.

IOWA MEDICAL & CLASSIFICATION CENTER PHARMACY REFILL PICKUP FORM

Scarpa, Gregory #6767058 METOPROLOL 50MG XL TABLET TWI PHARMACEUTI	ISP / Housing Unit 3A-Pod CALS QTY: 30.00 Order Expires: 11/22/2020
THE SAM MEDICATION LISTED ABOVE IS READY FOR DATE: AT YOUR FACILITY'S	FOR PICKUP. PLEASE REPORT TO HEALTH SERVICES SAM PILL LINE TIME TO PICK IT UP.
YOU MUST BRING YOUR EMPTY	WITH YOU AND TURN IT IN TO GET



Patient Information Sheet

Atomoxetine (marketed as Strattera)

This is a summary of the most important information about Strattera. For more information, talk to your healthcare professional.

FDA ALERT [09/2005] Suicidal Thinking in Children and Teens

- Strattera may increase thoughts of suicide or suicide attempts in children and teens.
- Call your child's healthcare professional right away if your child or teen has:
 - · new or increased thoughts of suicide
 - changes in mood or behavior including becoming irritable or anxious

The label for Strattera is being revised to include the above warnings.

This information reflects FDA's current analysis of data available to FDA concerning this drug. FDA intends to update this sheet when additional information or analyses become available.

What Is Strattera?

Strattera is used to treat a condition called Attention-Deficit with Hyperactivity Disorder (ADHD) in children, teens, and adults. Strattera has not been studied in children under 6 years old.

Who Should Not Take Strattera?

You should not take Strattera if you:

- are taking a medicine called a Monoamine Oxidase Inhibitor (MAOI). Do not take Strattera for at least 2 weeks after you stop taking a MAOI. Do not take a MAOI for at least 2 weeks after you stop taking Strattera.
- have an eye disease called narrow angle glaucoma

What Are The Risks?

The following are the major potential risks and side effects of Strattera. However, this list is not complete.

The following are the major potential risks and side effects of Strattera therapy:

- Suicidal thoughts or actions: Strattera may
 increase thoughts of suicide or suicide attempts
 in infrequent cases. Call you doctor right away
 if you become irritable or anxious or have other
 mood changes, or if you have thoughts of
 suicide.
- Liver Damage: Strattera can cause liver damage in rare cases. Call your doctor right away if you have itching, dark urine, yellow skin or eyes, upper right-sided stomach area pain, or unexplained "flu-like" symptoms.
- Weight Loss/Slowed Growth: Some people may lose weight while being treated with Strattera. It is not known if growth will be slowed in children who use Strattera for a long time. Height and weight should be watched in children who are taking Strattera.
- Impaired Motor Skills: Do not drive or operate dangerous machines until you know how Strattera affects you.

Some common side effects that may occur with Strattera in children include:

- upset stomach
- decreased appetite
- · nausea or vomiting
- dizziness
- tiredness
- mood swings

Some common side effects that may occur with Strattera in adults include:

- constipation
- dry mouth
- nausea
- decreased appetite
- dizziness
- problems sleeping
- sexual side effects
- · problems urinating
- · menstrual cramps



Questions? Call Drug Information, 1-888-INFO-FDA (automated) or 301-827-4570 • Druginfo@cder.fda.gov



Patient Information Sheet

Atomoxetine (marketed as Strattera)

These are **not** all of the side effects reported with Strattera. Your healthcare professional can give you a more complete list of side effects.

What Should I Tell My Healthcare Professional?

Before you start taking Strattera, tell your healthcare professional if you:

- have or had liver problems. You may need a lower dose of Stattera.
- have high blood pressure. Strattera can increase blood pressure.
- have problems with your heart or an irregular heartbeat. Strattera can increase heart rate (pulse).
- have low blood pressure. Strattera can cause dizziness or fainting in people with low blood pressure.
- are trying to become pregnant, are already pregnant, or are breast-feeding.

have a problem with depression or suicidal thinking.

Can other Medicines or Food Affect Strattera?

Strattera and certain other medicines can interact with each other. Tell your healthcare professional about all the medicines you take including prescription and non-prescription medicines, vitamins, and herbal supplements. Some medicines may affect how Strattera works or Strattera may affect how your other medicines work. Know the medicines you take. Keep a list of them with you to show your healthcare professional.

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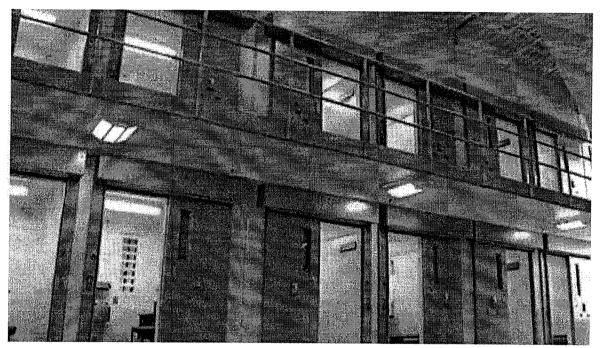
Kiosk Messages All Report Kiosk Messages From 08/23/2020 To 09/24/2020 - All Mailboxes

6767058 - Gregory	6767058 - Gregory Scarpa, Jr				
Message Date	Author	Mailbox	Subject	Text	tus
08/24/2020 11:02 am	LINDSEY.MOELLER	Vídeo Visitation	Video Visitation	Scarpa, Greg - 6767058 with Bennett, Deanna Video Visit Details Start: Saturday, August 29, 2020 2:00 PM (US/Central) End: Saturday, August 29, 2020 2:30 PM (US/Central) Duration: 30 minutes scheduled, 20 minute visit	D
		6.		Visitor timezone: US/Eastern Visitor start time: Saturday, August 29, 2020 3:00 PM (US/Eastern) Visitor end time: Saturday, August 29, 2020 3:30 PM (US/Eastern)	
08/26/2020 6:30 am	08/26/2020 6:30 am Offender	Health Services - Sick appointment w/Doctor Call	appointment:w/Docton	having problems while eating I'm having trouble getting the food down, causing Read choking & at times vomiting. Thank You Grenow Scarce 8767058	
08/26/2020 6:37 am Offender	Offender	Health Services - Dental	Dentures	If possible i need to exchange my dentures with a new pair, the ones i have are Read very old, they squish the food instead of chopping, they also don't fit right which are realisting me head aches. Then Kyn, Granns 676768	
08/26/2020 7:21 am CYNTHIA.FEDLER	CYNTHIA FEDLER	Health Services - Sick appointment w/Doctor Call	appointment w/Doctor	I have scheduled you for sick call today at 2:30pm. Cindy Fedler, RN	P
08/31/2020 1:35 pm	LINDSEY.MOELLER	Video Visitation	Video Visitation	Scarpa, Gregory - 6767058 with Velez, Kori Video Visit Details Start: Friday, September 4, 2020 10:00 AM (US/Central) End: Friday, September 4, 2020 10:30 AM (US/Central) Duration: 30 minutes scheduled, 20 minute visit	pe
09/11/2020 10:55 am	LINDSEY.MOELLER	Video Visitation	Video Visitation	Visitor timezone: US/Eastern Visitor start time: Friday, September 4, 2020 11:00 AM (US/Eastern) Visitor start time: Friday, September 4, 2020 11:30 AM (US/Eastern) Scarpa, gregory - 6767058 with scarpa, gregory Video Visit Details Start: Sunday, September 13, 2020 1:30 PM (US/Central) End: Sunday, September 13, 2020 2:00 PM (US/Central) Duration: 30 minutes scheduled, 20 minute visit	o g
09/14/2020 6:47 am Offender		Health Services - Sick Call	Choking	Visitor timezone: US/Eastern Visitor start time: Sunday, September 13, 2020 2:30 PM (US/Eastern) Visitor end time: Sunday, September 13, 2020 3:00 PM (US/Eastern) Due to choking, losing my breath while eating I'd like to if possible have an ADL Worker check-up on me during Dinner, I've almost passed out more than once	0 2
09/15/2020 5:35 am	AMANDA.DODSON Health Services - Stok C Call	Health Services - Sick Call	Choking	Inank you cregory Scarpa 6 (6/058) [will get with Tasha about this, I would say it will be a mentor that we would have. Read check on you. Do you feel as though you need more ADL assistance with other continues as though you need more ADL.	pe
09/15/2020 6:34 am Offender	Offender	Health Services - Sick Call	Choking	don't need other assistance, but I did talk to Joy Kuper about a mentor check- Read up on me & she told me that Mentors aren't trained for such and that I would need to get with Medical & in case there's a problem the ADL workers are	P
09/15/2020 7:14 am	AMANDA DODSON	Health Services - Sick Choking Call	Choking	uanieu iorine problem Inank you Gregory Scarpa b/b/056 Thank you. Iwill discuss this with Tasha. Thanks RN Dodson	pe
09/17/2020 12:32 pm	LINDSEY.MOELLER.	Video Visitation	Video Visitation	Scarpa, Gregory - 6767058 with Bennett, Deanna Video Visit Details Start: Saturday, September 19, 2020 2:00 PM (US/Central)	pe
lowa Department of Corrections	rections		Page 1 of 2	09/24/2020 7:35 am	35 am



Iowa State Penitentiary orders new restri COVID-19 cases found

Nick Weig 10/5/2020



© Provided by KGAN Cedar Rapids

The Iowa Department of Corrections has imposed new restrictions on inmates at the Iowa State Penitentiary in Ft. Madison after three inmates tested positive for COVID-19.

Right now, three inmates and four staffers have tested positive for the virus. 22 others working at the state prison have recovered. This is far from the first outbreak of COVID-19 in state-run prisons. The Case 1:94-cr-01119-ERK Document 1049-1 Filed 10/30/20 Page 58 of 70 PageID #: 2131 deadliest was in the Fort Dodge center, where 360 inmates were infected and recovered, but three others died.

According to the Department of Corrections, inmates have been placed on restricted movement, and additional testing is being conducted. The restrictions also prohibit video conferences with loved ones.

For complete information on the status of the pandemic in lowa's state prisons, click here.

Case 1:94-cr-01119-ERK Document 1049-1 Filed 10/30/20 Page 59 of 70 PageID #: 2132 Quick stats

Prison	Inmates Tested	Inmates Positive			Staff Recovered	
Anamosa	286	0	0	1	8	0
Clarinda	2,546	29	31	3	4	0
Fort Dodge***	3,994	1	361	1	45	3
ICIW	322	Ó	0	2	11	0
IMCC**	6,058	3	317	2	40	1
ISP	1,325	27	5	1	26	0
Mt. Pleasant	2,856	9	437	0	11	0
Newton	494	0	2	2	6	0
North Central	185	0	0	1	1	0
Total	18,066	69	1,153	13	152	4

(Last update: 10/14/20)

10/2/20 Update: Due to new positive cases at CCF and ISP, these facilities have been placed on restricted movement, and additional testing is being conducted. Video visitation will not be available at either facility until movement status has returned to normal.

Definitions:

Inmates tested: Means tests administered to inmates; may include individual inmates that were tested multiple times. Inmates positive: Means inmates that are currently considered "positive," whether symptomatic or asymptomatic, but have not qualified as "recovered."

Inmates recovered: Means inmates that have had COVID-19, but have qualified as recovered from their illness and are believed to no longer be contagious.

^{*}Some staff data is reliant on self-reporting.

^{**4/22/20} Update: The department began conducting extensive testing at IMCC.

^{*** 7/2/20} Update: The department began conducting extensive testing at FDCF.

Case 1:94-cr-01119-ERK Document 1049-1 Filed 10/30/20 Page 60 of 70 PageID #: 2133 Quick stats

Prison	Inmates Tested	Inmates Positive			Staff Recovered	COVID Related Inmate Deaths
Anamosa	310	0	0	2	8	0
Clarinda	2,769	6	56	4	5	0
Fort Dodge***	4,096	0	362	0	46	3
ICIW	333	0	0	0	13	0
IMCC**	6,473	3	321	0	42	1
ISP	1,570	15	19	3	26	0
Mt. Pleasant	2,993	5	445	3	11	0
Newton	510	0.	2	3	7	0
North Central	187	0	0	2	1	0
Total	19,241	29	1,205	17	159	4

(Last update: 10/20/20)

10/2/20 Update: Due to new positive cases at CCF and ISP, these facilities have been placed on restricted movement, and additional testing is being conducted. Video visitation will not be available at either facility until movement status has returned to normal.

Definitions:

Inmates tested: Means tests administered to inmates; may include individual inmates that were tested multiple times. Inmates positive: Means inmates that are currently considered "positive," whether symptomatic or asymptomatic, but have not qualified as "recovered."

Inmates recovered: Means inmates that have had COVID-19, but have qualified as recovered from their illness and are believed to no longer be contagious.

^{*}Some staff data is reliant on self-reporting.

^{**4/22/20} Update: The department began conducting extensive testing at IMCC.

^{*** 7/2/20} Update: The department began conducting extensive testing at FDCF.

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Lossific life style, I say Purposely locause one of my Objectives læside myself ubs to boop my son for away from that life, which I was successful in doing so. Son es 39 years old, breside Dis Gental problem (Bergnosis us doing good. I met a winderful lady from Springfield Ottio, a lang-Jime Jegal assistant, her of his it off together as if We knew one another france, lefor Covid-19 De bron they are of tenom proud thomas should some priticell four years, our relationship is wonderful and we are talking morriage in the mean juties, she want to track me & put me up to date with the computer Technology your Home before it give you an uponte of my medical Baldemi d want your Honor to Some of will never lose this remove feeting I have from my wrongs and it can guarante you your Honor There Would also witele le no Recidirism and can quarante that to you will never des or hear of me being in a court room on the Wrong side of the law as for The medical issues that I'm experiencing boom exacts bus noted upon of the still the Farmes les sound it is it is yellerson mande to ensured Alis is Oxomes. at comment of the remarks of a golf Boll size turner in book It will more miteraged on shall take trooked your goes down i my whind pipe make Choking a frequent occurrence, and with having very limited Salina due

to the Robintian That Burnt my balus glands, latures at time I Acho he toll bernet one sult aucki out alt a point Where I med to hapsfully got my broat a Earle I can't eat 80% of the month proposed by the Prison. for the dame reasons Stated, Being the case the prison it Assot took a som suig rettorm all glock or read i've prisoh That consist of cold Cuts, Bread, Charle, pudding a Milk for . It's 5 years. Due to the length of time of cold cuts & packaged foods that I'm allowed to Buy at committeey evision Spil sund was a nacros st ai evilled le Which I'm to being medication for the also briffer with merus damage caused by the 8 hours of how burgaries (Nock + Throat) the medication is 3200 mg daily (CasApentia). & Do Constitute decline where as recently given medication for the layuning of Demantia Cowed By alghimers of also there of ministriam find our certain biosyltrogy. I reflict difficult, I have cholestoral issues, arthritis/joint pain Dim not allowed to go up striss, I have psoriesis causing Abin issues, Indown for foot care once a month, I have Bladder Issues that I'm taking medication to help me winate and need to go immidiately, hive had a serious Blood Clot Post a Romin Surgery, your home of could continue But I think you so the picture. Your Honn Due to The numbers going up with Covid-19 in Joses & Daving covid-19 Scares Love, et is become very anxious knowing That if ensiled be born mitibones Ossibal your Atile suring the Tap L Weakened Immune System due to the amount of Chemo

Case 1:94-cr-01119-ERK Document 1049-1 Filed 10/30/20 Page 65 of 70 PageID #: 2138

Deanna Bennett 5316 Ridgewood Road East Springfield, OH 45503

August 19, 2020

The Honorable Edward R. Korman United States District Judge United States Courthouse 225 Cadman Plaza East Brooklyn, New York 11201

Re: USA vs. Gregory Scarpa, Jr Case No. 94-CR-1119 (ERK)

Dear Judge Korman:

I am writing this letter on behalf of Gregory Scarpa, Jr., the defendant in the above referenced matter.

My name is Deanna Bennett and I currently reside in Springfield, Ohio, where I work as a legal assistant in an attorney's office. I met Greg in June of 2017, seven months after a friend of mine asked if I would send a card of encouragement to a prison inmate who had been struggling with some health-related issues. I have since communicated regularly with Greg by letters and telephone and, prior to the recent COVID19 restrictions, by visiting with him at least once a month.

When I first met Greg, I knew little of his past lifestyle or why he had been incarcerated. After several letters we had written to one another, phone calls and frequent visits, I grew to see the loving person that I believe Greg is today. Let me share with you one perfect example. I have a sister, Susie, who is 67 years old and intellectually disabled. She has the mentality of a young child and cannot really read or write. However, she is as "wise as an owl". Greg has sent and still continues to send, my sister beautiful "homemade" cards for the holidays that always brighten up my sister's face. When I am on the phone with Greg and he hears that I am with Susie, I will put him on speaker phone, and he will talk to her for a few minutes. The highlight of Susie's day is allowing her to share with Greg that she loves him and she prays for his health, but most of all that God loves him. So wise, yet so childlike.

Case 1:94-cr-01119-ERK Document 1049-1 Filed 10/30/20 Page 66 of 70 PageID #: 2139

In addition, I have visited Greg often and I have heard so much positive feedback, both from prison staff about how "Scarpa" is a great guy, and also from other inmates he has mentored along the way, especially the younger kids that come into the institution. So many look up to him because he has been locked down for so many years. They know he shares the truth about prison with them, and they listen when he tells them how everyone should conduct themselves with respect for each other and the prison staff.

I also stay in close contact with Greg's four children and his five grandchildren. Greg went to prison when all of his own children were so young that his absence had a huge impact on their upbringing. I can relate to that because I lost my father when I was just five years old. He was walking across the street in the dark and was struck and killed by a car. Well, today I am 55 years old. In a sense, my background and that of Greg's children, growing up without a father, were similar and traumatic, to say the least. Greg nevertheless stayed close to his kids and looked out for them as best he could, and I know they all love him dearly to this day.

Your Honor, I believe one hundred percent that Greg has served his time well and has always made it his business to steer clear of any trouble in prison. Despite the difficulties of prison life that I can only begin to imagine, Greg has been a fine human being in all his years inside and an inspiration to many of the younger inmates who are incarcerated with him. He has an amazing heart and I believe that, if he is released while he still has the strength and health to do so, he will make a successful return to society. He has shared with me many stories about his past, which he is certainly not proud of, but he never shied away from taking full responsibility for his past lifestyle and his commitment to avoiding any misconduct in his future, whether in prison or out.

By the grace of God, if Greg is granted a compassionate release, he may have a few years left on this earthly domain to be able to spend with his family and mine. I have one son, a 21-year old college graduate who has spoken a number of times on the telephone with Greg and enjoys their conversations. My sister Susie also looks forward to the day she can meet Greg. If he is released, I plan to be at Greg's side and help him learn how to live in a totally changed society, and to do whatever I can to help his health improve. Greg has been away for 32 years, and much has changed that he will need to adapt to, but I hope I can be a guide to him in all things. I am committed to helping him tremendously along the way, whether with daily life, or education, or his growing health concerns.

Greg and I both prefer to live in a location other than New York or New Jersey. Do not get me wrong, I love the culture and diversity that the East Coast has to offer, but I believe we would need to find a place that is calm and offers us both some serenity at this point in our lives. We are inclined to move either to Florida, where he would be able to work for his sister, or to Iowa, where Greg can be close to the doctors who are following his cancer care, or to my home state of Ohio. Greg's sister is happy to have him work from any location once I teach him how to telecommute.

Greg turned 69 years old this year, and both his age and his declining health, I honestly believe, eliminates even a possibility of any recidivism. The 32 years he has already served have

been a severe punishment, and there are no words to express how remorseful Greg feels. As I said before, I have come to deeply believe that Greg is an incredibly good person, despite the serious mistakes of his past. He is caring, often sharing food that he is unable to eat with other inmates. He is so much smarter now, with a balanced outlook on life, and so many completed programs to his credit. I would also like your Honor to know that I have not only raised a son who is moving forward with his life in a way that makes me proud, but I have never been in any trouble myself and I am not about to start. I believe I will be a positive influence for Greg, and his release would be a wonderful time for both of us, however long it lasts.

Your Honor, I know that you recognized that Greg's poor health, his unusual and significant contributions to law enforcement and public safety, and his exceptional prison record, all called for a reduction in his remaining sentence when he was last before the Court. In the years since then, I have witnessed his health further decline, and I sincerely believe he will die in prison if he is required to serve the full term of his remaining sentence inside prison walls. When I last visited with him before the COVID restrictions suspended all visiting, we often "dined" from the vending machines because we spent many hours in the visitor's room together and got hungry. Every time, the dry items that are available from the machines made him choke severely, and he had a hard time swallowing even moist items. I know when I have spoken to him these last few months, his voice is often hoarse and raspy and I worry that he has had more choking episodes that are pretty much a daily occurrence for him since his surgeries in 2014. I was so glad that some of his fellow inmates were able to look out for him by sitting with him when he eats to help him when he chokes, but that safety net has been discontinued now too while the prison enforces social distancing. Compared even to the best conditions at prison, I know I could make Greg much more comfortable and perhaps even improve his health with home cooked meals that he can swallow and enjoy.

The other troubling condition that I have noticed in the past year or so is that Greg's memory is failing. When I first knew Greg just three years ago, he seemed very sharp and had good recall. Now when we speak, he often repeats the same story or asks me the same question after I answered it only a few minutes earlier. I also bring my visitor's card with funds to use in the vending machines, and almost every time Greg takes it to bring us something to eat, he forgets it in the machine and I have to remind him to go back and get it. He told me he has been tested for his memory decline and did not do so well on the test they gave him. He is taking medications now that are supposed to slow the progress of dementia, but this is another condition that is making prison life all the more difficult for him now.

As I understand it, the law has now changed to give courts the power to recognize when extraordinary and compelling circumstances warrant a defendant's compassionate release. I sincerely urge your Honor to recognize the decline in Greg's physical and cognitive health, along with his excellent record of rehabilitation and service to the public, and to grant Greg the opportunity to spend his last years at home, surrounded by his family and friends who love him.

At this point, I believe he has fully paid his debt to society, and keeping him in prison when he can no longer adequately care for himself serves no purpose.

Again, your Honor, I understand the troubles that Greg had in his past because he has admitted his wrongdoings to me. If Greg is granted a compassionate release, I will be there to help him and make sure that he abides by every rule, and complies fully with all conditions of home detention or supervision. I have a true passion for law and order, and your Honor may rest assured that Greg will always be walking a straight line when I am in the picture. I feel that Greg has already learned the importance of living by the rules, but I assure your Honor I will be his backup to make sure he stays on the right path for the rest of his life.

Thank you, your Honor, for considering this letter and for recognizing that Gregory Scarpa, Jr., was and is a man who deserves a lesser sentence, and who should be granted compassionate release because he has already served such a long sentence, because his record in prison has been exceptional, and because his health issues are making his life in a prison setting just too difficult. Should you need to get in touch with me, I can be reached at (937) 561-1197.

Very truly yours,

Deanna Bennett

Deanna Bennett



Iowa State Penitentiary Interoffice Memorandum

Randy Gibbs Warden

Date:

October 9th, 2020

To:

ISP Population

From:

Randy Gibbs, Warden

Subject:

COVID19

Your cooperation over the last week is appreciated. It has not been an easy week for anyone. I am happy to report that almost every inmate here cooperated with testing. The very few that did not will spend much more time behind a door in order to keep the staff and inmates at ISP safe.

The first round of test results showed that around two dozen inmates were positive for COVID 19. As you know, moves were conducted yesterday. These moves placed all positive inmates, as well as all presumptive positive inmates, in HU4 or on HU2B.

In order to ensure that all infected inmates are identified, a second test must be conducted next week. Once those results are received, you will likely see some form of normalcy return for those who test negative. Two negative tests are required to identify someone as negative. Staff follow the exact same guidelines.

Hang in there, for many of you the finish line is near!

RG/jj

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